

Revision: HCFA-AT-80-38 (BPP)  
May 22, 1980

OMB No.: 0938-0193

State/Territory: NEVADA

SECTION 1 - SINGLE STATE AGENCY ORGANIZATION

Citation  
42 CFR 431.10  
AT-79-29

1.1 Designation and Authority

- (a) The Nevada Department of Human of Resources  
is the single State agency designated to administer or supervise the administration of the Medicaid program under title XIX of the Social Security Act. (All references in this plan to "the Medicaid agency" mean the agency named in this paragraph.)

ATTACHMENT 1.1-A is a certification signed by the State Attorney General identifying the single State agency and citing the legal authority under which it administers or supervises administration of the program.

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TN # 76B32  
Supersedes  
TN #

Approval Date 3/2/77 Effective Date 10/01/76

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Citation  
Sec. 1902(a)

of the Act

1.1(b) The State agency that administered or supervised the administration of the plan approved under title X of the Act as of January 1, 1965, has been separately designated to administer or supervise the administration of that part of this plan which relates to blind individuals.

\_\_\_ Yes. The State agency so designated is

\_\_\_\_\_.  
This agency has a separate plan covering that portion of the State plan under title XIX for which it is responsible.

X Not applicable. The entire plan under title XIX is administered or supervised by the State agency named in paragraph 1.1(a).

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Citation  
Intergovernmental  
Cooperation Act

of 1968

1.1(c) Waivers of the single State agency

requirement that are currently  
operative have been granted under  
authority of the Intergovernmental  
Cooperation Act of 1968.

☐ Yes. ATTACHMENT 1.1-B describes  
these waivers and the approved  
alternative organizational  
arrangements.

☐ Not applicable. Waivers are no  
longer in effect.

☒ Not applicable. No waivers have  
ever been granted.

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1.1(d) X The agency named in paragraph  
1.1(a) has responsibility for all  
determinations of eligibility for

Medicaid under this plan.

— Determinations of eligibility  
for Medicaid under this plan are  
made by the agency(ies)  
specified in ATTACHMENT 2.2-A.  
There is a written agreement  
between the agency named in  
paragraph 1.1(a) and other  
agency(ies) making such  
determinations for specific  
groups covered under this plan.  
The agreement defines the  
relationships and respective  
responsibilities of the agencies.

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1.1(e) All other provisions of this plan are

administered by the Medicaid agency  
except for those functions for which  
final authority has been granted to a  
Professional Standards Review  
Organization under title XI of the Act.

(f) All other requirements of 42 CFR 431.10  
are met.

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